1386166

FORM D

SEGURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

OMB APPROVAL

OMB Number 3235-0076
Expires: April 30, 2008
Estimated average burden
response 16.00

07040558

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (Check if this is an amendment and name has changed, and indicate change.) Shona Energy Company, Inc., Common Stock	
	Section 4(6) 🛛 ULOE
A. BASIC IDENTIFICATION DATA	PROCESS
Enter the information requested about the issuer	PROCESS
Name of Issuer (Check if this is an amendment and name has changed, and indicate change.)	1441 1 0 000
1770 St. James Place. Ste 360. Houston, Texas 77056 [(713)	one Number (Including Area dode)200 622-8809
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	one Number (Including Area Civison FINANCIAL
Brief Description of Business exploration and production of oil and gas	
Type of Business Organization Corporation Ilimited partnership, already formed other business trust Ilimited partnership, to be formed	er (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year 1 2	☐ Actual ☐ Estimated

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC II	DENTIFICATION DATA		
Enter the information requested for the following:	dispose, or direct the vote or disponents	osition of, 10% or	
Check Box(es) that Apply:		☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hotard, Edgar G.			
Business or Residence Address (Number and Street, City, State, 299 North Post Oak Lane, Suite 3202, House			
Check Box(es) that Apply: Promoter Beneficial Ow	ner 🛛 Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Payne, James L.			
Business or Residence Address (Number and Street, City, State, 2 31 Pinewold Circle, Houston, Texas 7702			
Check Box(es) that Apply:	ner	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Petersen, Gary R.			
Business or Residence Address (Number and Street, City, State, 2 1100 Louisiana Street, Suite 3150, Hous			_
Check Box(es) that Apply: Promoter Beneficial Ov	wner	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Smith, Jordan R.			
Business or Residence Address (Number and Street, City, State, 2515 W. Greens Road, Suite 1000, Houston			
Check Box(es) that Apply:	wner	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Tanner, Garry A.			
Business or Residence Address (Number and Street, City, State, 2 3000, 333 7 Avenue SW, Calgary, Alberta	•		
Check Box(es) that Apply: Promoter Beneficial Ox	wner	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Watson, Charles L.			
Business or Residence Address (Number and Street, City, State, 1100 Louisiana Street, Suite 3150, Hous			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Ox	wner 🛛 Executive Officer		General and/or Managing Partner
Full Name (Last name first, if individual) Womack, John R.			
Business or Residence Address (Number and Street, City, State, 1770 St. James Place, Suite 360, Housto			

					
Check Box(es) that Apply:		☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, i Castleberry, Rand	,				X X
Business or Residence Addr 1770 St. James Pl		-	*		
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, in Leavell, Larry D.	findividual)				
Business or Residence Addr 1770 St. James Pl			•		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Nabors Global Hol	•		-		
Business or Residence Addr Mint Flower Place	•		· - •	a	
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if EnCap Energy Capi		L.P.			
Business or Residence Address 1100 Louisiana, S					
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if EnCap V-B Acquisi	,				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Coo	de)	·	

1100 Louisiana, Suite 3150, Houston, Texas 77002

				В.	. INFORMA	ATION ABOU	JT OFFER	ING				
1 ⊔≏	s the leaver	sold or de	ae tha incur	or intend to	sell to non	accredited in	nvectore in	this offering	12		Yes	No
1. Ha	s ilie issuer	SUIU, UI UO				mn 2, if filing			j:		⊔	KZI
2. Wh	nat is the mi	nimum inve		• • •	,						.\$ 1	0,000
											Yes	
4. Ent cor a p sta	ter the info mmission or person to be ites, list the	rmation rear similar rer listed is ar name of th	quested for nuneration in associated ne broker or	each pers for solicitation person or a dealer. If r	on who ha on of purch agent of a b more than f	is been or vasers in con proker or dea	will be pai nection wi aler registe ons to be li	id or given, th sales of s red with the	directly or securities in SEC and/o	r indirectly, a the offering. or with a state crsons of such	ny If or	⊠
	ne (Last na		•	·					-			
			U.S.A.)									
			s (Number									
				60, Hou	iston, 1	TX 77002	: 					
	f Associate			T								
			U.S.A.)									
			Has Solicite tividual Stat								Г А	JI States
(AL) (IL)	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA] X	(FL) [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY] X		[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX] }	([UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	ne (Last na ss or Reside		ss (Number	and Street,	City, State,	Zip Code)					, ,	
Name o	f Associate	d Broker or	Dealer									
			Has Solicit								A	ul States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	(IN)	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT) [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	(ND) [WA]	[OH] [WV]	{OK] [WI]	[OR] [WY]	[PA] [PR]
Full Nar	me (Last na	me first, if i	ndividual)									
Busines	s or Reside	ence Addres	ss (Number	and Street,	City, State,	Zip Code)						
Name o	of Associate	d Broker or	Dealer		·							
						Purchasers					A	VII States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(AL) [IL] [MT] [RI]	[IN] [NE] [SC]	[A2] [IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	J3C	OF FROCEEDS			
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate			Amount Already
	Type of Security		Offering Price			Sold
	Debt	\$	3	\$	5	
	Equity	\$	9,795,050	- 9	•	9,795,050
	☐ Preferred			-	-	<u> </u>
	Convertible Securities (including warrants)	\$		9	5	
	Partnership Interests	\$		- 5	, ,	
	Other	\$		- ;	5	
	Total	\$	9,795,050	- 5	5	9,795,050
	Answer also in Appendix, Column 3, if filing under ULOE.			-	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
	Accredited Investors		Number Investors 13	,	\$	Aggregate Dollar Amount of Purchases 9,795,050
	.,		0	-	" - \$	0
	Non-accredited Investors			-	-	
	Total (for filings under Rule 504 only)			- ;	\$_	<u></u>
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505			_ ;	\$	
	Regulation A				\$	
	Rule 504			_ ;	\$	
	Total			_ ;	\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			;	\$	0
	Printing and Engraving Costs			;	\$	0
	Legal Fees		_	;	\$	100,000
	Accounting Fees			1	\$	0
	Engineering Fees				\$	0
	Sales Commissions (specify finders' fees separately)			. ;	\$	433,503
	Other Expenses (identify)				\$	0
	Total		×	l :	¢.	533 503

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	D US	ΕO	F PROCEEDS			
	 Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 					\$	9,261,547
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box on the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.			Payments to			
				Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		\$	0		\$	0
	Purchase of real estate		\$	0		\$	0
	Purchase, rental or leasing and installation of machinery and equipment		\$	0		\$	0
	Construction or leasing of plant buildings and facilities		\$	0		\$	0
	Acquisition of other businesses (including the value of securities involved in this						
	offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	0		\$	0
	Repayment of indebtedness		\$	0		\$	0
	Working capital		\$	0	⊠	\$	9,261,547
	Other (specify):		\$	0		\$	0
	Column Totals		\$	0		\$	9,261,547
	Total payments Listed (column totals added)		•	<u>⊠\$_</u>	9,26	1,	547

	D. FEDERAL SIGNATURE	
	r to furnish to the U.S. Securities and Excha	on. If this notice is filed under Rule 505, the following nge Commission, upon written request of its staff, the of Rule 502.
Issuer (Print or Type)	Signature	Date
Shona Energy Company, Inc.	Shetal Mentlewski	December 21, 2006
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Shetal Mentlewski	Secretary	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 pr disqualification provisions of such rule?	esently subject to any of the		lo 3
		See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as require		ate in which this notice is filed, a notice on Form	m
3.	The undersigned issuer hereby undertakes to offerees.	to furnish to the state administrators, upon wri	tten request, information furnished by the Issue	er
4.	The undersigned issuer represents that the offering Exemption (ULOE) of the state in exemption has the burden of establishing the	which this notice is filed and understands	be satisfied to be entitled to the Uniform Limite that the issuer claiming the availability of this	id is
	elssuer has read this notification and knows ersigned duly authorized person.	the contents to be true and has duly cause	d this notice to be signed on its behalf by th	ie
İssı	ier (Print or Type)	Signature	Date	—
Sh	ona Energy Company, Inc.	Shutal Mentlewski	December 21, 2006	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		_
Sh	etal Mentlewski	Secretary		

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPEN					5
1	Intend to sell to non-accredited investors in State (Part B - Item 1)		Type of security and aggregate offering price offered in State (Part C - Item 1)		4 Type of investor and amount purchased in State (Part C - Item 2)				
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ								·-	
AR									
CA			-						
СО									
СТ									
DE	•								
DC									
FL									
GA									
н								!	
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD					5				
МА		х	\$3,776,300	1	\$3,776,300	0	\$0		х
MI									
MN									
MS									
MO	-						1		

				APPENDI	х				
1	Intend to non-ac investors (Part B -	to sell credited in State	Type of security and aggregate offering price offered in State (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV			10000						
NH					<u></u>				
NJ									
NM									
NY		х	\$1,768,750	3	\$1,768,750	0	\$0		х
NC									
ND									
ОН									
ок									
OR									ļ
PA									
RI									
sc									
SD									
TN									
TX		х	\$4,250,000	9	\$4,250,000	0	\$0		х
UT									
VT									
VA									
WA									
wv									
WI									
WY									
PR									

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